

South Carolina Department of Social Services
FI NON-COMPLIANCE CHECKLIST

Client's Name: _____ Case Number: _____

The FI case manager must complete this form, and the FI supervisor and county director/designee must sign this form before the participant is referred to the eligibility specialist to impose a sanction.

The information checked must be documented and filed in the case record.

Section I. To Be Completed by the FI Case Manager

- ☐ Conciliation efforts failed; client did not show for conciliation appointment.
- ☐ Reasons for failure to comply with Employability Plan clearly documented.
- ☐ The client has been screened and assessed for alcohol/substance abuse.
- ☐ The client has been screened and assessed for indication of domestic/family violence.
- ☐ The client has been screened and assessed for involvement with Child Protective Services.
- ☐ The client was informed of the potential sanction or an attempt was made to verbally inform the client.
- ☐ Good cause was evaluated and the client does not have good cause for non-compliance.

The participant without good cause:

- ☐ Failed/refused to report for assessment/reassessment or other required interview.
- ☐ Failed/refused to actively engage in or complete supervised job search.
- ☐ Failed/refused to accept or complete a Community Service Placement or Work Experience Placement.
- ☐ Failed/refused to accept or complete OJT or subsidized employment.
- ☐ Failed to accept a bona fide job offer.
- ☐ Voluntarily quit employment.
- ☐ Failed/refused to complete other activity assigned on the Employability Plan.

Specify other activity/requirement on the Employability Plan: _____

Casemanager's Signature

Date

Section II. To Be Completed By The FI Supervisor

I have reviewed the case record. There is documentation in it to support the determination that this participant has failed to comply with FI Work Program requirements and good cause does not exist.

Supervisor's Signature

Date

Section III. County Director's Approval

County Director/Designee Signature

Date

INSTRUCTIONS FOR DSS FORM 1323

Purpose

This form must be completed prior to notifying the eligibility specialist to sanction a client for noncompliance with FI work program requirements to ensure that the appropriateness of the sanction has been documented in the case record.

Use of Form

The form is completed by the FI case manager and submitted to the supervisor for approval to sanction an FI participant. The form is used prior to imposing a sanction.

Instructions

The FI case manager completes identifying information at the top of the form, indicates the type of documentation filed in the case record to support action to sanction/close the case, and what action or failure to act caused the sanction.

The FI supervisor and county director/designee sign and date the form if in concurrence that there was non-compliance and that there was no good cause not to cooperate.